

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing

Small PHA Plan Update
Annual Plan for Fiscal Year: **2001**

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan
Agency Identification**

PHA Name: Housing Authority of the City of Poth, TX

PHA Number: TX 248

PHA Fiscal Year Beginning: (10/2001)

PHA Plan Contact Information:

Name: Sharon Boester, Executive Director

Phone: (830) 484-3311

TDD:

Email (if available): phousing@felpsis.net

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☒ Other : *Poth City Hall*

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☒ Other : *Poth City Hall*

PHA Programs Administered:

- ☒ Public Housing and Section 8 ☐ Section 8 Only ☐ Public Housing Only

Annual PHA Plan
Fiscal Year 2001
 [24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Contents

Page #

Annual Plan

- i. Executive Summary (optional)
- ii. Annual Plan Information
- iii. Table of Contents
 - 1. Description of Policy and Program Changes for the Upcoming Fiscal Year
 - 2. Capital Improvement Needs
 - 3. Demolition and Disposition
 - 4. Homeownership: Voucher Homeownership Program
 - 5. Crime and Safety: PHDEP Plan
 - 6. Other Information:
 - A. Resident Advisory Board Consultation Process
 - B. Statement of Consistency with Consolidated Plan
 - C. Criteria for Substantial Deviations and Significant Amendments

Attachments

- ☒ Attachment A : Supporting Documents Available for Review
- ☒ Attachment B: Capital Fund Program Annual Statement
- ☒ Attachment C: Capital Fund Program 5 Year Action Plan
- ☐ Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement
- ☐ Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan
- ☒ Attachment D: Resident Membership on PHA Board or Governing Body
- ☒ Attachment E: Membership of Resident Advisory Board or Boards
- ☐ Attachment __: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)
- ☒ Other

- A. ***Pet Policy***
- B. ***Staffing Chart***

ii. Executive Summary

[24 CFR Part 903.7 9 (r)]

The Poth PHA is continuing to make corrections and improvements required under the current Improvement Plan and those funded through the current CFP grant within the next year.

The PHA will also be working over the next five years to plan new housing and pursue more Section 8 vouchers through the HUD SuperNOFA. It will also pursue other grants from HUD, other Federal, State corporate and foundation sources, to expand their ability to serve the housing needs of Poth area residents.

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

Pursuant to the provision of QHWRA a new lease agreement has been adopted and Volunteer Work will be brought up for consideration in the upcoming year.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$ 20,430.

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to next component ; if “yes”, complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name: 1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family’s resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

- A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

- B. What is the amount of the PHA’s estimated or actual (if known) PHDEP grant for the upcoming year? \$
- _____

- C. ☐ Yes ☒ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

- D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2. If yes, the comments are Attached at Attachment (File name)

3. In what manner did the PHA address those comments? (select all that apply)

- ☐ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
☐ Yes ☐ No: below or
☐ Yes ☐ No: at the end of the RAB Comments in Attachment ____.
- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment ____.
- ☒ Other: (list below)
Residents will again be invited, as in the past, to participate in an advisory capacity. Thus far none have participated.

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: ***Texas Dept of Housing and Community Affairs***

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☐ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☒ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☒ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
- ☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

- ☒ Yes ☐ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below: ***From the City of Poth the Housing Authority of the City of Poth has requested a Waiver of Pilot. The City of Poth granted this Housing Authority a waiver of payment on the city provided utilities of Water & Sewer.***

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: ***Pending*****C. Criteria for Substantial Deviation and Significant Amendments****1. Amendment and Deviation Definitions**

24 CFR Part 903.7(r)

A. Substantial Deviation from the 5-year Plan:

This Housing Authority shall revise the budget to delete or substantially revise approved work items, add new work items, or incur CFP costs in excess of the approved budget amount for any work item without prior Field Office review and approval, unless the budget revision (1) exceeds the dollar threshold of \$15,000; (2) incurs costs in excess of the approved budget amount for any project; or (3) changes the method of accomplishment from contract to force account labor

A. Significant Amendment or Modification to the Annual Plan:

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
NA	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing ceiling rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of ceiling rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.		
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
X	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations
X	Any required policies governing any Section 8 special housing types <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <input checked="" type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD52837) for any active grant year	Annual Plan: Capital Needs
NA	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
NA	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Capital Needs
X	Section 8 Administrative Plan	Annual Plan: Demolition and Disposition
NA	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
NA	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
NA	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
NA	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
NA	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.		
NA	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention
NA	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
PENDING CONTRACT AWARDED ON 7-16-01	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA’s response to any findings	Annual Plan: Annual Audit
X	Improvement Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF POTH		Grant Type and Number Capital Fund Program: TX59P248501-01 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements	\$2000.			
4	1410 Administration				
5	1411 Audit				
6	1415 liquidated Damages				
7	1430 Fees and Costs	\$1000.			
8	1440 Site Acquisition				
9	1450 Site Improvement	\$4500.			
10	1460 Dwelling Structures	\$10000.			
11	1465.1 Dwelling Equipment—Nonexpendable	\$2930.			
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1498 Mod Used for Development				
19	1502 Contingency				
20	Amount of Annual Grant: (sum of lines 2-19)	\$20430.			
21	Amount of line 20 Related to LBP Activities	0			
22	Amount of line 20 Related to Section 504 Compliance				
23	Amount of line 20 Related to Security	0			

Annual Statement/Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary					
PHA Name: HOUSING AUTHORITY OF THE CITY OF POTH		Grant Type and Number Capital Fund Program: TX59P248501-01 Replacement Housing Factor Grant No:			Federal FY of Grant: 2001
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
24	Amount of line 20 Related to Energy Conservation Measures	0			

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages								
PHA Name: HOUSING AUTHORITY OF THE CITY OF POTH			Grant Type and Number Capital Fund Program #: TX59P248501-01 Replacement Housing Factor #:			Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Proposed Work
				Original	Revised	Funds Obligated	Funds Expended	
HA-WIDE	VARIOUS MGMT IMPROVEMENTS	1408	N/A	\$2000.				
HA-WIDE	FEES & COSTS	1430	N/A	\$1000.				
TX248-1	SITE IMPROVEMENTS Drainage	1450	12 units	\$4500.				
TX248-1	DWELLING STRUCTURES Unit drains, Replace Kitchen & Bathroom Cabinets	1460	4 units	\$10000.				
TX248-1	DWELLING EQUIPMENT	1465.1	4 units	\$2930.				

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule								
PHA Name:			Grant Type and Number Capital Fund Program #: Capital Fund Program Replacement Housing Factor #:			Federal FY of Grant:		
Development Number Name/HA-Wide Activities	All Fund Obligated (Quart Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates	
	Original	Revised	Actual	Original	Revised	Actual		

Annual Statement/Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

[illegible]

Capital Fund Program 5-Year Action Plan

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
TX248	PHA Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Management Improvements (1408)	\$2,000.	2002
Fees & Costs (1430)	\$1,500	
Site Improvements – Security and landscaping (1450)	\$3,500.	
Dwelling Structures – unit drains, replace kitchen and bathroom cabinets and selected window replacement (1460)	\$11,000.	
Non-Expendable Dwelling Equipment – upgrade electrical service to units (1465.1)	\$2,430.	
Total estimated cost over next 5 years	\$20,430.	

CFP 5-Year Action Plan			
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement			
Development Number	Development Name (or indicate PHA wide)		
TX248	PHA Wide		
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Management Improvements (1408)		\$2,000.	2003
Fees & Costs (1430)		\$1,500	
Site Improvements – Security and landscaping (1450)		\$3,500.	
Dwelling Structures – unit drains, replace kitchen and bathroom cabinets and selected window replacement (1460)		\$11,000.	
Non-Expendable Dwelling Equipment – upgrade electrical service to units (1465.1)		\$2,930.	
Total estimated cost over next 5 years		\$20,430.	

CFP 5-Year Action Plan		
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement		
Development Number	Development Name (or indicate PHA wide)	
TX248	PHA Wide	
Description of Needed Physical Improvements or Management Improvements	Estimated Cost	Planned Start Date (HA Fiscal Year)
Management Improvements (1408)	\$2,000.	2004
Fees & Costs (1430)	\$1,500	
Site Improvements – Security and landscaping (1450)	\$3,500.	
Dwelling Structures – unit drains, replace kitchen and bathroom cabinets and selected window replacement (1460)	\$10,500.	
Non-Expendable Dwelling Equipment – upgrade electrical service to units (1465.1)	\$2,930.	
Total estimated cost over next 5 years	\$20,430.	

CFP 5-Year Action Plan			
<input checked="" type="checkbox"/> Original statement <input type="checkbox"/> Revised statement			
Development Number	Development Name (or indicate PHA wide)		
TX248	PHA Wide		
Description of Needed Physical Improvements or Management Improvements		Estimated Cost	Planned Start Date (HA Fiscal Year)
Management Improvements (1408)		\$2,000.	2005
Fees & Costs (1430)		\$1,500	
Site Improvements – Security and landscaping (1450)		\$3,500.	
Dwelling Structures – unit drains, replace bathroom cabinets and selected window replacement (1460)		\$2,000.	
Non-Expendable Dwelling Equipment – upgrade each units HVAC systems to central heating and A/C (1465.1)		\$11,430.	
Total estimated cost over next 5 years		\$20,430.	

Required Attachment D: Resident Member on the PHA Governing Board

1. ☐ Yes ☒ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

B. How was the resident board member selected: (select one)?

☐ Elected

☐ Appointed

C. The term of appointment is (include the date term expires):

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

- ☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis
- ☐ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

☒ Other (explain):

- ***Residents will again be invited, as in the past, to participate in an advisory capacity. Thus far, none have participated. Election of a Resident Member will be considered in the upcoming year.***

B. Date of next term expiration of a governing board member: N/A

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position):

Required Attachment E: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Currently there is no Resident Advisory Board. However, this will be brought up for discussion in the upcoming Fiscal year.

B. Pet Ownership Policy

Families are not allowed to have Pets Of any kind except caged birds or an aquarium unless a family member (not just the head or spouse) requires a seeing eye guide dog or service animal as an accommodation for a disability. If a family is granted an exception, to meet the need of a disabled family member, the guidelines for pet management will be the same as for the elderly/disabled. Elderly and disabled residents are allowed to have pets under the following guidelines:

- o Any eligible resident with a pet will be required to pay a pet deposit of \$125. The deposit is due and payable at the time the pet is acquired or at the time of move-in if the resident already has the pet. The HA may consider a payment plan for the pet deposit in hardship cases providing a minimum of \$75 is initially paid.
- o Only the following pets are authorized:
 - only one dog or cat per resident family;
 - dogs under 30 lbs.;
 - cats, under 25 lbs.;
 - caged birds (limit 2);
 - fish in an aquarium not to exceed 10 gallons.
- o The HA will not approve rodents of any kind, caged or not, reptiles, etc.
- o Exceptions to the size and type of pet authorized will be made for guide dogs and/or service animals for the disabled as a reasonable accommodation even if the family is located in a family development.
- o The resident family must provide proof of required inoculations (including rabies) prior to bringing a dog onto the HA premises. Any other locally required inoculations for dogs or cats must be verified.
- o Pets must be under the control of their owners at all times. Dogs must be leashed at any time they are outside the unit.
Pet owners are required to clean up any messes made on HA property made by their pets and to obey all local community requirements for clean-up.
- o All dogs must be licensed if required in the community and the owners must provide verification annually of up-to-date, current licensing.
- o Failure to abide by the HA established pet rules will result in a notice to the family that they must relinquish the pet. Failure to do so within 14 calendar days will result in the HA issuing a notice of lease violation and intention to terminate the lease.
- o Any denial of a family's request to have a pet or notice that the family must give up a pet will include a statement of their right to have an informal hearing on the issue.
- o The tenant will be directly responsible for the cleanup and proper disposal of any pet's body solids. The tenant will ensure all shots/vaccinations are always current. If not in compliance, the tenant will be notified to dispose of the pet immediately - no exceptions. Dogs: known breeds of aggressive dogs such as Pit Bulls, German Shepherds, etc., will not be allowed, as well as any exotic animals (snakes, spiders, wild animals, etc.). Any exceptions to mixed breed dogs or any other pets not specifically allowed in the pet policy will be at the decision of the Poth Housing Authority.

**HOUSING AUTHORITY OF THE CITY OF POTH
STAFFING CHART**



